alreght e sulf regitt it this why I serviced upon 4 you of my life ney there would Washington const help me with my con on con help me all the emploration in so I con wont this

MARTIN F. HORN SECRETARY

MARTIN L. DRAGOVICH SUPERINTENDENT

ADDRESS ALL REPLIES TO SUPERINTENDENT



PENNSYLVANIA DEPARTMENT OF CORRECTIONS STATE CORRECTIONAL INSTITUTION AT CAMP HILL P.O. BOX 8837, CAMP HILL, PA 17001-8837

(717) 737-4531

ROBERT M. NOVOTNEY DEPUTY SUPERINTENDENT FACILITY MANAGEMENT

JOHN A. PALAKOVICH DEPUTY SUPERINTENDENT CENTRALIZED SERVICES

ROBERT G. GIMBLE BUSINESS MANAGER

JANET S. SMITH PERSONNEL DIRECTOR

I certify that this report is an accurate reflection of the subject's inmate account activity and balance for the period indicated on the In Forma Pauperis Form.

State/Correct

O AMAL

United States District Court

DIST	RICT OF
Stephen Washington SCI Comp Hill, Ph	APPLICATION TO PROCEED IN FORMA PAUPERIS, SUPPORTING DOCUMENTATION AND ORDER
Lackwanna County Spiso. 1371 N. Washington we Seconto	2 CASE NUMBER: 1-00-(V-1991) = 1815509. 21(are
1. Stephen Washington	declare that I am the (check appropriate box)
petitioner/plaintiff	vant (filing 28 U.S.C. 2255 motion)
respondent/defendant	other
in the above-entitled proceeding; that, in supprequired to prepay fees, cost or give security the am unable to pay the costs of said proceeding entitled to relief. The nature of my action, defend to present on appeal are briefly stated as follows:	nerefor, I state that because of my poverty, I or give security therefor; that I believe I am use, or other proceeding or the issues I intend
	FILED HARRISBURG, PA
	МДҮ 1 5 2001
In further support of this application, I answe	MARY E. D'ANDREA, CLE er the following questions. PER DEPUTY CLERK
	Yes No X Dunt of your salary or wages per month, and employer. (list both gross and net salary)
*	
b. If the answer is "no," state the dat salary and wages per month which	e of last employment and the amount of the you received.

AO 240 Reverse	·
If the answer to any of the above is "yes," de amount received from each during the past twel	escribe each source of money and state the live months.
	•
3. Do you own any cash, or do you have mone	ev in chacking or savings accounts?
Yes No (Include any funds in	
If the answer is "yes," state the total value	
4. Do you own or have any interest in automobiles or other valuable property (exand clothing)?	
Yes No No	
If the answer is "yes," describe the prope	rty and state its approximate value.
5. List the persons who are dependent upon those persons, and indicate how much yo	
those persons, and indicate now mach yo	d Continue toward their support
MA	
I declare under penalty of perjury that the fo	regoing is true and correct.
Executed on	Mallon
(Date)	Signature of Applicant
CERTIFIC (Prisoner Acco	
I certify that the applicant named herein has the on account to his credit at the SCT CAMP LAY	ne sum of \$ _0
institution where he is confined. I further certify that the	e applicant likewise has the following securities to
his credit according to the records of said institution	
770	5 792
I further certify that during the last six months the app	licant's average balance was \$ & 10
Marty.	Y William
	Authorized Officer of Institution
ORDER OF	edd
•	The application is hereby granted. Let the applicant proceed without prepayment of
The application is hereby denied	cost or fees or the necessity of giving security therefor.
United States Judge Date	United States Judge Date
United States Judge Date	or Magistrate

OFFICE OF THE CLERK UNITED STATES DISTRICT COURT FOR THE MIDDLE DISTRICT OF PENNSYLVANIA

HARRISBURG OFFICE

MARY E. D'ANDREA, CLERK
Dear Counselor:
We have received the following documents <u>Upplicates 07P</u> via (UPS, Fed Ex US Mail) Other) on <u>5-8-01</u> .
HOWEVER:
You neglected to provide the correct number of copies. Please forwardmore copy(s) as soon as possible and <u>indicate when the original was filed.</u> (Local Rule 5.2 requires that an ORIGINAL PLUS TWO COPIES of all pleadings are to be filed with the Clerk's Office.
Your requested items were not returned because a self-addressed stamped envelope was NOT provided for the return of the extra copy(s). Please do so in the future.
The proper information (i.e. case number, Judicial Officer, caption,) was missing Form the documents you filed. Lell me walk farm The case number listed on these documents is not a case in the Middle District of Pennsylvania.
Our records show that you are not admitted to practice in the Middle District of Pennsylvania. Please complete the enclosed special admission form and return it to Our office for approval.
You neglected to provide us with the \$25.00 special admission fee. Please forward it as soon as possible.
The Local Rules for the Middle District of Pennsylvania will be forwarded to you, upon Receipt of a \$3.20 postage paid self-addressed envelope.
Enclosed is your check. We are unable to process it because you neglected to provide the case number, violation number and/or reason for payment. Please return the check with the proper information, so that it may be processed accordingly.
Other:
your only send the one Join to Till and I did so why mat sended that